| DATE                                       | 12/13/04  |   |          |                                |
|--|---|---|----------|--------------------------------|
| TO .                                       | 12/13/04  |   |          |                                |
| FROM:                                      | Office of Initial Patent Exar   | mination                                      |          |                                |
| SUBJECT                                    | Fee Due   |   |          | •                              |
| APPLICATIO                                 | N NUMBER 10/0250  | 149   |          |                                |
| Office for the authorization Appropriate f | for the attached document sub-<br>e following reason. Please che<br>to charge a deposit account.<br>fee. If an authorization is not part fee by check | ck the application f<br>If an authorization i | or the a | ppropriate<br>nt, please charg |
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| If you have any<br>Eleanor Kurtz 7         | questions, please contact Cynthi<br>703-308-3642  | a Streater at 703-306                         | -5430 oı |                                |
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